PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
(571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

indicated unless corrected by maintenance fee notification	respondence including the I below or directed otherwise is.	in Block I, by (a	n) specifying a	new corres	pondence address;	and/or (b) indicating a sep	parate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note Fee(pape have	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
759				tificate of Mailing or Tran				
Steven L. Highlar FULBRIGHT & JA 600 Congress Aven		I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted/to the USPTO (571) 273-2885, on the date indicated below.						
Suite 2400 Austin, TX 78701			S	Down L. I	Highlander	(Depositor's name)		
			70 3006			(Signature)		
			الآ	urle 30, 20	006	(Date)		
APPLICATION NO.	FILING DATE]	FIRST NAMED	INVENTOR	<i></i>	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
08/970,045	08/970,045 11/13/1997		EUGEN KOREN			20487/113	2118	
	NTIBODIES TO LIPOPROT							
APPLN. TYPE	SMALL ENTITY	ISSUE FI	ĒE	PUBLIC	CATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	ional YES \$700)		\$300	\$1000	07/05/2006	
EXAMINER		ART UNIT		CLASS-	SUBCLASS			
DUFFY, PATRICIA ANN		1645						
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custome Number is required. 			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to					
PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNI	RESIDENCE DATA TO BE an assignee is identified be 37 CFR 3.11. Completion of EE na Medical Reseassignee category or categor	low, no assignee of this form is NOT	data will appe I a substitute f (B) RESIDEN dation	ear on the pa for filing an a NCE: (CITY	tent. If an assigned assignment. and STATE OR COLLAHOMA	ountry) a City, OK	document has been filed for our country Government	
4a. The following fee(s) are of X Issue Fee Y Publication Fee (No single Advance Order - # of		4b. Payment of Fee(s): ☐ A check in the amount of the fee(s) is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached. ☐ In Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-1212/OMRF: 04 or lost and overpayment.						
a. Applicant claims SM	(from status indicated above) MALL ENTITY status. See 3	7 CFR 1.27.				L ENTITY status. See 37 C		
The Director of the USPTO i NOTE: The Issue Fee and Pu interest as shown by the reco	is requested to apply the Issuublication Fee (if required) words of the United States Pate	e Fee and Publicat ill not be accepted nt and Trademark	ion Fee (if any I from anyone Office.	y) or to re-ap other than th	ply any previously e applicant; a regis	paid issue fee to the applicatered attorney or agent; or the	ation identified above. he assignee or other party in	
Authorized Signature			Date June 30, 2006					
Typed or printed name Steven L. Highlander			Registration No37,642					
This collection of informatio an application. Confidentialis submitting the completed ap this form and/or suggestions Box 1450, Alexandria, Virginia 22313-1 Ludar the Program Pedicts	nia 22313-1450. DO NOT S	SEND FEES OR C	COMPLETED	FORMS TO	THIS ADDRESS.	SEND TO: Commissioner	for Patents, P.O. Box 1450,	